

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 091551159
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
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35	1		1			
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37		1		1		
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50						
TOTAL IND.	2		2			
TOTAL DEP.	6		6			
TOTAL CLAIMS	8		8			

	IND	DEP	IND	DEP	IND	DEP
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TOTAL CLAIMS						